57th Legislature LC1031.01

1	BILL NO
2	INTRODUCED BY
3	(Primary Sponsor)
4	A BILL FOR AN ACT ENTITLED: "AN ACT PROHIBITING INSURANCE DISCRIMINATION FOR TREATMENT
5	OF THE MUSCLES, BONES, OR JOINTS OF THE JAW AND FACE THAT IS MEDICALLY NECESSARY FOR
6	TREATMENT OF TEMPOROMANDIBULAR DYSFUNCTIONS; AND AMENDING SECTIONS 33-22-101 AND
7	33-31-111, MCA."
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9	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
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11	NEW SECTION. Section 1. Insurance coverage for treatment involving muscles, bones, or joints
12	of jaw or face. (1) A group or individual disability policy, certificate of insurance, or membership contract
13	delivered, issued for delivery, renewed, extended, or modified in this state and covering diagnosis and
14	treatment procedures, including surgical treatment, involving the muscles, bones, or joints of the skeleton
15	may not discriminate against similar procedures involving the muscles, bones, or joints of the jaw or face
16	that are medically necessary for treatment of temporomandibular dysfunctions. This includes medically
17	necessary treatment for a congenital or developmental deformity, disease, or injury. Payment for those
18	procedures may be subject to a maximum lifetime benefit of \$2,000 for nonsurgical treatment.
19	(2) The policies, certificates of insurance, and membership contracts to which subsection (1)
20	applies include those for:
21	(a) state employees;
22	(b) the university system;
23	(c) a county, city, or town;
24	(d) a school district;
25	(e) any other political subdivision of the state; and
26	(f) any self-funded multiple employer welfare arrangement not regulated by the federal Employee
27	Retirement Income Security Act of 1974.
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29	Section 2. Section 33-22-101, MCA, is amended to read:
30	"33-22-101. Exceptions to scope. Parts 1 through 4 of this chapter, except 33-22-107,
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1 33-22-110, 33-22-111, 33-22-114, 33-22-125, 33-22-130 through 33-22-136, 33-22-141, 33-22-142,

- 2 [section 1], 33-22-243, and 33-22-304, and part 19 of this chapter do not apply to or affect:
- 3 (1) any policy of liability or workers' compensation insurance with or without supplementary 4 expense coverage;
- 5 (2) any group or blanket policy;
- 6 (3) life insurance, endowment, or annuity contracts or supplemental contracts that contain only 7 those provisions relating to disability insurance as:
- 8 (a) provide additional benefits in case of death or dismemberment or loss of sight by accident or 9 accidental means; or
- 10 (b) operate to safeguard contracts against lapse or to give a special surrender value or special
 11 benefit or an annuity in the event that the insured or annuitant becomes totally and permanently disabled,
 12 as defined by the contract or supplemental contract;
- 13 (4) reinsurance."

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- **Section 3.** Section 33-31-111, MCA, is amended to read:
- "33-31-111. Statutory construction and relationship to other laws. (1) Except as otherwise provided in this chapter, the insurance or health service corporation laws do not apply to a health maintenance organization authorized to transact business under this chapter. This provision does not apply to an insurer or health service corporation licensed and regulated pursuant to the insurance or health service corporation laws of this state except with respect to its health maintenance organization activities authorized and regulated pursuant to this chapter.
- (2) Solicitation of enrollees by a health maintenance organization granted a certificate of authority or its representatives is not a violation of any law relating to solicitation or advertising by health professionals.
- (3) A health maintenance organization authorized under this chapter is not practicing medicine and is exempt from Title 37, chapter 3, relating to the practice of medicine.
- 27 (4) This chapter does not exempt a health maintenance organization from the applicable certificate 28 of need requirements under Title 50, chapter 5, parts 1 and 3.
- 29 (5) This section does not exempt a health maintenance organization from the prohibition of 30 pecuniary interest under 33-3-308 or the material transaction disclosure requirements under 33-3-701



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1 through 33-3-704. A health maintenance organization must be considered an insurer for the purposes of

- 3 (6) This section does not exempt a health maintenance organization from:
- 4 (a) prohibitions against interference with certain communications as provided under chapter 1, part

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6 (b) the provisions of Title 33, chapter 22, part 19;

33-3-308 and 33-3-701 through 33-3-704.

- 7 (c) the requirements of 33-22-134 and, 33-22-135, and [section 1];
- 8 (d) network adequacy and quality assurance requirements provided under chapter 36; or
- 9 (e) the requirements of Title 33, chapter 18, part 9.
- 10 (7) Chapter 1, parts 12 and 13, of this title, 33-3-431, 33-15-308, 33-22-131, 33-22-136,
- 11 33-22-141, 33-22-142, 33-22-246, 33-22-247, 33-22-514, 33-22-523, 33-22-524, 33-22-526, and
- 12 33-22-706 apply to health maintenance organizations."

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NEW SECTION. Section 4. Codification instruction. [Section 1] is intended to be codified as an integral part of Title 33, chapter 22, part 1, and the provisions of Title 33, chapter 22, part 1, apply to

16 [section 1].

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NEW SECTION. Section 5. Saving clause. [This act] does not affect rights and duties that matured, penalties that were incurred, or proceedings that were begun before October 1, 2001.

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